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CONFIRMATION NO. 2634

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|---|---|------------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/546,135  | <b>FILING OR 371(c) DATE</b><br>08/19/2005<br><b>RULE</b>   | <b>CLASS</b><br>205                | <b>GROUP ART UNIT</b><br>1753   | <b>ATTORNEY DOCKET NO.</b><br>032301.426 |
| <b>APPLICANTS</b><br>Christian Reufer, Maintal, GERMANY;<br>Thomas Lehmann, Langenselbold, GERMANY; < Rainer Sungenbauer, Gelnhausen, Germany<br>Christoph Weckbecker, Grundau-Lieblos, GERMANY;  |   |                                    |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP04/02665 03/15/2004   |   |                                    |   |  |
| <b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 103 13 169.8 03/25/2003   |   |                                    |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 04/11/2006*</b>   |   |                                    |   |  |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <u>08/21/06</u><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWING</b><br>0  | <b>TOTAL CLAIMS</b><br>8                 |
| <b>INDEPENDENT CLAIMS</b><br>1  |   |                                    |   |  |
| <b>ADDRESS</b><br>25461   |   |                                    |   |  |
| <b>TITLE</b><br>Method for the anodic alkoxylation of organic substances  |   |                                    |   |  |
| <b>FILING FEE RECEIVED</b><br>900   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ /<br><input type="checkbox"/> Credit |  |